

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003620

Entity Name: BARON'S RESIDENTIAL CARE INC**Current Principal Place of Business:**131 IMPERIAL HEIGHTS DRIVE
ORMOND BEACH, FL 32176**Current Mailing Address:**131 IMPERIAL HEIGHTS DRIVE
ORMOND BEACH, FL 32176**FEI Number:** 93-1169296**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ROWELL, AILEEN
131 IMPERIAL HEIGHTS DRIVE
ORMOND BEACH, FL 32176 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	C
Name	ROWELL, HAROLD F JR.
Address	5289 LODI STREET
City-State-Zip:	SAN DIEGO CA 92117

Title	PD
Name	ROWELL, AILEEN
Address	131 IMPERIAL HEIGHTS DRIVE
City-State-Zip:	ORMOND BEACH FL 32176

Title	ST
Name	ROWELL, HAROLD F JR
Address	5289 LODI STREET
City-State-Zip:	SAN DIEGO CA 92117

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROWELL, HAROLD F, JR.

MANAGER CEO

02/26/2023

Electronic Signature of Signing Officer/Director Detail_____
Date